

**UNIFORM FRANCHISE REGISTRATION NOTIFICATION PAGE**  
**Appendix A – Illustration A**

File No. \_\_\_\_\_  
(Insert prior number, if any)

FEE: \_\_\_\_\_  
(Enclosed at time of initial filing)

Date of Filing: \_\_\_\_\_

Notification of Filing for (Check only one category):

\_\_\_ Registration of an offer or sale of franchises

\_\_\_ Annual Report

\_\_\_ Amendment

1. Name of Franchisor.

Name under which the Franchisor is doing or intends to do  
business.

2. Franchisor's principal business address.

Name and address of Franchisor's agent in the State of Illinois  
authorized to receive process (your registered agent and the Attorney General):

_____	Illinois Attorney General,
_____	500 South Second Street,
_____	Springfield, Illinois 62706

3. Name, address and telephone number of subfranchisors, if any, for  
this State.

4. Name, address and telephone number of person to whom  
communications regarding this application should be directed.